

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
EASTERN DIVISION**

KYLE BENGSTON,)
Plaintiff,)
vs.) 3:06-cv-00569-SRW
DAVID BAZEMORE, O. D., AND)
WAL-MART STORES, INC.,)
Defendants.)

**DEFENDANTS' INTERROGATORIES AND
REQUEST FOR PRODUCTION OF DOCUMENTS TO KYLE BENGSTON**

COME now the Defendants, David Bazemore, O.D. and Wal-Mart Stores, Inc., and pursuant to the Alabama Rules of Civil Procedure request the Plaintiff to respond to the consolidated Interrogatories and Request for Production of Documents.

Instructions and Definitions

1. "You" shall mean and refer to the Plaintiff, Kyle Bengston, his agents, and/or other representatives.
2. If a privilege is claimed as to any document covered by these consolidated Interrogatories and Requests for Production, Defendants request that each document to which a privilege is claimed be identified with such particularity that the Court, and not counsel unilaterally, may determine whether the document is in fact entitled to privilege status.
3. Defendants requests a separate response to each request listed below, and that any documents produced be designated as responses to that specific request, and that any supplemental productions be designated and separated in the same manner.
4. "Document" means every writing, printing, record, graphic, photographic or sound

reproduction of every type and description that is in your possession, control, custody and knowledge which refers to or was prepared before, during, and after the incident or search defined below, including but not limited to, correspondence, memoranda of agreements, assignments, meeting minutes, memoranda, stenographic or handwritten notes, diaries, notebooks, account books, orders, invoices, statements, bills, checks (or check stubs or records), vouchers, purchase orders, reports, studies, surveys, charts, maps, analyses, publications, books, pamphlets, periodicals, catalogues, brochures, schedules, circulars, bulletins, notices, instructions, manuals, journals, data sheets, work sheets, statistical compilations, data processing cards, microfilms, computer records (including printouts, floppy or other magnetic storage media), tapes, photographs (positive or negative prints), drawings, films, videotapes, pictures, voice recordings; every copy of such writing or record when such copy contains any commentary or notation whatsoever that does not appear on the original. Defendants expressly intend for the term "Document" to include any attachments or exhibits to the requested document, or any other documents referred to in the requested document or incorporated by reference.

5. These interrogatories are intended to be continuing and supplemental responses are requested from the Plaintiff in the event matters sought in these interrogatories are discovered by the Plaintiff prior to trial.

INTERROGATORIES

1. Please state your name, address, date of birth, social security number, and all names by which you have been known in the past.
2. Please state the address for each place you have resided in the past five (5) years and include the dates that you lived at each residence.
3. Please identify each person you expect to call as an expert witness at trial and please

indicate, as to each such person:

- a) The subject matter on which the expert is expected to testify;
- b) The substance of the facts and opinions to which each such person is expected to testify and a summary of the grounds for each opinion.

4. Please set forth fully, completely, and in your own words, your entire medical history as it may relate to any illness, disease, injury, condition, or disability of your body, stating in your answer the nature and extent of all treatment given therefor, the date thereof, and the names and addresses of all doctors and hospitals involved.

5. Have you been hospitalized within the ten (10) years preceding the date that you filed this Complaint? If so, please state:

- a) The name and address of each such hospital.
- b) The inclusive dates of hospitalization.
- c) A description of the condition for which you were hospitalized.
- d) A description of the treatment received at the hospital.

6. Have you been examined or treated by a doctor for any condition during the ten (10) years preceding the filing of this Complaint? If so, state:

- a) The name, address and specialty of the doctor.
- b) Each date the doctor was consulted.
- c) A description of the condition for which you were examined or treated.
- d) A description of the examination or treatment given by the doctor.

7. Please describe the nature and extent of the medical or hospital treatment which you claim to have received as a result of the occurrence alleged in your complaint, stating in each case the date you received treatment, the names and addresses of the physicians, and/or the hospitals involved.

8. Please state each and every date of any examination, treatment or care which you received from any doctor, physician, medical practitioner, hospital, clinic or other institution for any condition, injury, illness or disability which you claim was suffered or sustained as a result of the occurrence alleged in your complaint, setting forth in detail as to each such date of examination, treatment or care:

- a) The name and address of each such doctor, physician, practitioner, hospital, clinic, or institution;
- b) The amount of any charge made to any other person or organization for the account of any such person, by each such doctor, physician, practitioner, hospital, clinic or institution, fully itemized as indicated in any bill rendered therefor.

9. Please describe fully, in your own words, and in complete detail any injuries, illnesses, or disabilities suffered by you at any time subsequent to the occurrence alleged in your complaint, other than those which you allege resulted from the occurrence alleged in your complaint.

10. With reference to the injuries, illnesses, or disabilities referred to in the preceding interrogatory, please state the name or names, and address or addresses of the person or persons who treated, examined or operated on you for such injuries, ailments, or illnesses.

11. Please give an account, itemized as fully and as carefully as you can, of all losses and expenses in dollars which you claim were incurred by you or on your behalf in the occurrence alleged in your complaint, stating in your answer those losses or expenses which are attributable to hospitals, doctors, medicines, medical appliances, and loss of earning capacity, if any.

12. Please give in answer to this interrogatory an itemized list of all losses and expenses in dollars which you expect to incur in the future as a result of the occurrence alleged in your

complaint.

13. If, as a result of the occurrence alleged in your complaint, you lost any earning capacity or time from your occupation, business or employment, please state as accurately as possible the full name and address of all of your past employers or your places of business.

14. If you received financial compensation from your employer, your business, any insurance company, any government agency or firm, or entity of any kind, covering or relating to any period of absence, or disability due to the occurrence alleged in your Complaint, please state:

- a) The total amount received by you;
- b) The names and addresses of the entity or entities.

15. Please state as to each and every person known to you to have heard or known about the occurrence alleged in your complaint:

- a) The name, profession, and address of each;
- b) The substance, within your best knowledge, of all information or knowledge about the alleged occurrence known to each such witness.

16. Please state the name and address of each person known to you to have any knowledge of any of the facts or circumstances described in your complaint.

17. Please state fully, in complete detail, and in your own words, all that the defendant Bazemore did or failed to do which in any way caused or contributed to cause the occurrence alleged in your complaint.

18. Please state fully, in complete detail, and in your own words, all that the defendant Wal-Mart did or failed to do which in any way caused or contributed to cause the occurrence alleged in your complaint.

19. Please state each any every act or omission on the part of the defendants which you

allege constitutes negligence.

20. If you claim that the action or activities of any other persons contributed to cause your alleged injury or damage, please state their names and professions and the manner in which they contributed to cause the injury or damage.

21. Please state the name, and address of your current employer, and all past employers, including the dates you were employed by such.

22. Please state the basis for you suing Wal-Mart Stores, Inc. in this action.

REQUEST FOR PRODUCTION

1. Please produce any documents that in any way are responsive to the preceding Interrogatories.

2. Please produce any and all documentation tending to support in any way the allegations contained in your complaint.

3. Please produce your tax returns for the years 2000 through 2005.

4. Please produce any and all documentation concerning any visits you have had with Dr. Gregory J. Sipenski, M.D.

5. Please produce a copy of all of your documents relating to any visits you have had with Dr. Bazemore.

ADAMS, UMBACH, DAVIDSON & WHITE LLP

BY: _____

BLAKE L. OLIVER (OLI020)
Attorneys for Defendants
P. O. Box 2069
Opelika, AL 36803-2069

CERTIFICATE OF SERVICE

I do hereby certify that I have this day served a true and correct copy of the above and foregoing Consolidated Discovery on David W. Adams, Esq., the Newman Law Firm, Park Plaza, Ste. 150, 178 South Main Street, Alpharetta, GA 30004, by mailing a copy of same to him in the United States mail, postage prepaid at the above address.

This the 29th day of September, 2006.

Of Counsel for Defendants